



STATE TREASURER'S LINKED DEPOSIT PROGRAMS APPLICATION FOR DEPOSIT

PLEASE IDENTIFY THE LINKED DEPOSIT PROGRAM (CHECK ONE):

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| <input type="checkbox"/> Cultivate Illinois: Agricultural & Environmental Loan Program | <input type="checkbox"/> Opportunity Illinois: Banking Development Loan Program |
| <input type="checkbox"/> Employ Illinois: Business Loan Program | <input type="checkbox"/> Opportunity Illinois: Community Development Loan Program |
| <input type="checkbox"/> Employ Illinois: Business Loan Program for Child Care Providers | <input type="checkbox"/> Opportunity Illinois: Hospital Loan Program |
| <input type="checkbox"/> Employ Illinois: Business Loan Program for TV & Movie Makers | <input type="checkbox"/> Opportunity Illinois: Consumer Loan Program for Citizen Soldiers |
| <input type="checkbox"/> Illinois Funds: Local Government Short Term Loan Program | <input type="checkbox"/> Opportunity Illinois: Consumer Loan Program for Illinoisans with Disabilities |

Dear Treasurer Giannoulis:

The undersigned, on behalf of the named financial institution, requests funding through the above mentioned linked deposit program in the manner and form identified below.

It is agreed that funds from this program shall not be loaned to any director, officer or employee (or immediate family member of any director, officer or employee) of this financial institution. If funds are received in the form of a repurchase agreement, the term of deposit shall not exceed 330 days.

It is agreed that if the participating Borrower fails to meet the objectives set forth in the application, the Treasurer may withdraw the deposit. Financial Institution acknowledges that all funds must be transferred to the borrower within ten (10) business days of the deposit date otherwise the Treasurer's Office may require the financial institution to pay a market rate of interest to cover any loss of interest incurred by the Treasurer's Office. Financial Institution also acknowledges that the funds cannot be used as a line of credit. Financial Institution agrees to notify the Treasurer's Office of a prepayment of a loan within ten (10) business days otherwise the Treasurer's Office may require the financial institution to pay a market rate of interest to cover any loss of interest incurred by the Treasurer's Office.

It is agreed that the financial institution must provide the Treasurer with a fully executed Letter of Agreement within ten (10) business days of receiving the deposit and that the Treasurer may withdraw the deposit if the financial institution fails to do so. It is further agreed that all information regarding the project is public information. The Treasurer's Office may release any information regarding the approval or rejection of the application or application for deposit.

Amount of funding requested: \$ _____ Date when funds are needed: _____

Term requested (Please refer to program guidelines for term limits): _____

Type of funding: _____ Time Deposit _____ Repurchase Agreement

Conventional loan rate for this project (as of the date of this application): _____ % (attach documentation)

Name of participating Borrower: _____

Name of Financial Institution: _____

Contact Person: _____ Title: _____

Phone number: _____

Signed: _____ Date: _____

<p>For Cultivate Illinois send to: Alexi Giannoulis Illinois State Treasurer Agricultural and Environmental Loan Programs 300 W. Jefferson Street Springfield, IL 62702 Phone: (217) 557-6436 Fax: (217) 557-6439</p>	<p>For Opportunity Illinois send to: Alexi Giannoulis Illinois State Treasurer Opportunity Illinois Loan Programs 100 W. Randolph Street, Suite 15-600 Chicago, IL 60601 Phone: (312) 814-1244 Fax: (312) 814-3716</p>	<p>For Employ Illinois send to: Alexi Giannoulis Illinois State Treasurer Employ Illinois Loan Programs 100 W. Randolph Street, Suite 15-600 Chicago, IL 60601 Phone: (312) 814-8953 Fax: (312) 814-3716</p>
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